

POSITION	INITIALS	DATE
CLASSIFIER	20	9/1/90
EXAMINER	238	9/1/90
VERIFIER	208	11-26-90
TYPIST		
CORPS CORR	43	11-21-90
SPEC. HAND	2	10-1-90
FILE MAINT		

# INDEX OF CLAIMS

BEST AVAILABLE COPY

Claim	Date
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SYMBOLS  
 (Through numeral)  
 Rejected  
 Allowed  
 Canceled  
 Restricted  
 Non-elected  
 Inference  
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 Objected

Claim	Date
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